



Department of Medicaid

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TO: Contracted Managed Care Organizations
Contracted MyCare Ohio Plans
Contracted OhioRISE Plan

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DATE: February 1, 2023

SUBJECT: Rendering Practitioner National Provider Identification (NPI) Requirements

The national standard for the EDI 837 professional transaction requires that an NPI, a unique identification number for covered health care providers, be submitted in the billing provider field on all claims. For most services, ODM also requires the rendering provider NPI on a claim when the practitioner who performed the service is different from the billing provider.

- Beginning February 1, 2023, ODM will require one rendering provider per claim at the header level, rather than the detail level, for professional claims for both fee-for-service (FFS) and managed care entities (MCEs) in order to ensure claims can be properly priced and paid.
 - The above requirement does not apply to Federally Qualified Health Center (FQHC)/Rural Health Clinic (RHC) providers. FQHC/RHC claims submitted to ODM for payment may include multiple rendering providers at the detail level because ODM pays FQHC/RHC providers based on an encounter.
 - The above requirement does not apply to waiver organizations (Provider Type 45). Waiver organizations are not required to provide a rendering provider NPI on claims.
- ODM requires community behavioral health centers (CBHCs) and professional medical groups to enroll with ODM and enroll and affiliate employees who render services, including CBHC dependently licensed practitioners and paraprofessionals.
- ODM requires FQHCs, RHCs, and clinics to enroll with ODM and enroll and affiliate employees or contractors who render services, including dependently licensed practitioners as described in MAL 622 and 622-A.
- Fee-for-service (FFS) claims that require the NPI of the professionals referenced above will deny when the rendering NPI is not on the claim. Managed Care Organizations, the OhioRISE Plan, and MyCare Ohio Plans (hereinafter referred to as managed care entities) are expected to do the same.
- MCEs should notify and inform providers that proper affiliations (i.e. individual rendering practitioners are affiliated to their agency/billing provider) are required for claims and encounters to be loaded into the fiscal intermediary (FI).
- For all providers, MCEs must verify both the billing and rendering provider are enrolled with ODM. MCEs can verify the NPI by using the Provider Master File (PMF). Self-directed caregivers can be verified using the Medicaid provider number on the PMF, as they are not required to have an NPI. For the EDI 837 institutional transaction, the MCEs must verify the attending physician is enrolled with ODM.

Questions from MCOs/MCOPs related to this communication should be sent to ManagedCarePolicy@medicaid.ohio.gov.
Questions from the OhioRISE Plan related to this communication should be sent to OhioRISEPolicy@medicaid.ohio.gov.